



## Mothers' family support and mothers' work on the success of exclusive breastfeeding in 7-12 months old infants

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### ABSTRACT

Exclusive breastfeeding for six months is one of the effective interventions to reduce the Infant Mortality Rate (IMR). Based on data from the community health center of Penawar Jaya, infants who received exclusive breastfeeding in 2019 are still low at only 49%. The research objective was to determine the correlation between family support and mothers' work on the successful accomplishment of exclusive breastfeeding for infants aged 7-12 months in the work area of the community health center of Penawar Jaya, Tulang Bawang Regency 2021. This research type is an analytical survey method with a cross-sectional design. The population is all mothers in the work area of the community health center of Penawar Jaya, Tulang Bawang Regency, who have infants aged more than 7-12 months totaling 463 people, with a sample of 43 people, which is calculated using the minimum sample formula from Lemeshow. Univariate analysis of percentage and bivariate analysis using chi-square test. The research results on family support for mothers were 44.2%, and mothers worked 67.4%. There is a correlation between family support for the accomplishment of exclusive breastfeeding. The p-value = 0.048, and there is a correlation between workers and the success of exclusive breastfeeding for mothers who have infants aged 7-12 months in the work area of the community health center of Penawar Jaya, Tulang Bawang Regency 2021 with p-value = 0.017 and OR 6.967. Suggestions for working mothers are expected to increase understanding regarding breastfeeding, and mothers can also involve all family members to play a role in breastfeeding.

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#### Kata kunci:

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### ABSTRAK

Pemberian ASI secara eksklusif selama 6 bulan terbukti merupakan salah satu intervensi efektif dapat menurunkan Angka Kematian Bayi (AKB). Berdasarkan data Puskesmas Penawar Jaya bayi yang mendapat ASI Eksklusif pada Tahun 2019, masih rendah yaitu hanya 49%. Tujuan penelitian ini diketahui hubungan antara dukungan keluarga dan pekerjaan ibu terhadap keberhasilan ASI eksklusif pada bayi usia 7-12 bulan di Wilayah Kerja Puskesmas Penawar Jaya Kabupaten Tulang Bawang Tahun 2021. Jenis penelitian ini metode Survey analitik dengan rancangan cross sectional. Populasinya adalah seluruh ibu di wilayah kerja UPTD Puskesmas Penawar Jaya Kabupaten Tulang Bawang yang mempunyai bayi berusia lebih dari 7-12 bulan berjumlah 463 orang, dengan sampel 43 orang, yang dihitung menggunakan rumus sampel minimal dari Lemeshow. Analisis univariat persentase dan analisis bivariate uji chi square Hasil penelitian dukungan keluarga pada ibu 44,2%, ibu Bekerja 67,4 %. Ada hubungan antara dukungan keluarga terhadap keberhasilan ASI eksklusif p value = 0,048 dan ada hubungan antara pekerja terhadap keberhasilan ASI eksklusif pada ibu yang memiliki bayi usia 7-12 bulan di Wilayah Kerja Puskesmas Penawar Jaya Kabupaten Tulang Bawang Tahun 2021 p value = 0,017 dan

OR 6,967. Saran bagi Ibu bekerja diharapkan dapat meningkatkan pemahaman berkaitan dengan penyimpanan dan pemberian ASI, dan ibu juga dapat mengikutsertakan semua anggota keluarga untuk berperan dalam pemberian ASI.

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## INTRODUCTION

Exclusive breastfeeding in the world is still low. Based on data from the United Nations Children's Fund (UNICEF), in 2012, only 39% of infants under six months were exclusively breastfed worldwide. This number did not experience a significant increase in 2015, namely, only 40% success in breastfeeding exclusive worldwide. China, one of the countries with the largest population in the world, only has a success rate of exclusive breastfeeding of 28%.

Other data states that Cambodia has succeeded in drastically increasing the rate of exclusive breastfeeding for infants under six months of age from 11.7% in 2000 to 74% in 2010. Another country, Tunisia, has provided awful news in the last decade, where the percentage of exclusive breastfeeding has decreased very drastically from 45.6% to 6.2%. Meanwhile, according to data from UNICEF, countries occupying the 3rd position with the lowest rates of exclusive breastfeeding worldwide include Somalia, Chad, and South Africa.

Breastfeeding is the ideal food for the growth and development of infants. WHO and The United Nations Children's Funds (UNICEF) recommend that children should only be breastfed for at least six months. Solid food should be given after the child is six months old, while exclusive breastfeeding is continued until the child is two years old (WHO, 2016).

Exclusive breastfeeding for six months continues until the age of two years. It can be interspersed with adequate complementary feeding breastfeeding has proven to be one of the effective interventions that can reduce the Infant Mortality Rate (IMR). The 2018 Nutritional Status Monitoring (PSG) results show that the percentage of infants 0-6 months who are still exclusively breastfed is 54.0%. In contrast, infants who have been exclusively breastfed until the age of six months, 29.5%. The percentage of infants 0-6 months in Lampung province who are still exclusively breastfed is 43.1% (RI Ministry of Health, 2018).

Family support is a process that occurs throughout life; the nature and type of support differ at various stages of the life cycle. Family support can be in the form of internal social support, such as support from husbands and siblings. It can also be in the form of external family support for the nuclear family (Friedman, 2010).

There is no data on breastfeeding success for working mothers in Indonesia. However, IDHS (2012) it was found that 7 out of 10 infants aged 4-5 months who were under direct maternal care were given additional food (44%), water (8%), milk, or other additional liquid supplements (9%), and who were breastfed (13%). Data from IDHS (2012) also states that 94% of children under the age of 2 years have been given breast milk, 44% of children aged less than six months have received exclusive breastfeeding, 49% of newborns have received breast milk within 1 hour after birth, and 66% of infants have received breast milk. Within 24 hours after birth. Okawary's (2015) research shows that mothers who

cannot give exclusive breastfeeding and switch to formula milk occur in working mothers.

Based on the Public Health Directorate General of the Ministry of Health of the Republic of Indonesia (2020), Lampung Province had low coverage of exclusive breastfeeding in 2019 in Sumatra, amounting to (69.33%), compared to other provinces such as West Sumatra (75.92%), Bengkulu (72.16%), and Riau (73.44%). (Directorate General of Public Health, Ministry of Health, Republic of Indonesia, 2020).

The coverage of exclusive breastfeeding in 2019 in Lampung Province is 69.33%. This figure is still below the expected target of 80%. The coverage of infants receiving exclusive breastfeeding for Tulang Bawang Regency is 76.8% (Health Profile of Lampung Province, 2019). The data report from the Tulang Bawang District Health Office, infants who received exclusive breastfeeding in 2019 in Penawar Jaya Health Center is low. The percentage are Tulang Bawang District (49%), Tulang Bawang 1 Health Center (87%), the Karya Jitu Building Health Center (79%), and the Banjar Baru Health Center (72%).

Based on the background above, the authors researched the relationship between family support and mothers' work on the success of exclusive breastfeeding in infants aged 7-12 months in the Work Area of Penawar Jaya Health Center, Tulang Bawang Regency, in 2020.

## METHOD

The type of research used in this research is quantitative. This research tries to explore how and why health phenomena occur. One uses a cross-sectional approach, namely a type of research that emphasizes the time of measurement/observation of independent and dependent variable data only once, at one time.

The sample in this study were mothers of infants aged 7-12 months in the working area of the Penawar Jaya Health Center, totaling 43 mothers.

The independent variables in this study were family support and the mother's work. In addition, the dependent variable in this study was the success of exclusive breastfeeding. The data collection used to find out the results of this study was by visiting each respondent's house in February - March 2021.

Univariate analysis is to explain or describe the characteristics of each research variable. The bivariate analysis used is the chi-square test. One uses cross tables to provide a complete description of the data to be processed. On the other hand, Bivariate analysis is carried out on two variables suspected of being related/correlated.

**RESULT AND DISCUSSION**

*Univariate Analysis Results*

This analysis was carried out on support data, mothers' work, and breastfeeding success.

Of 43 respondents, most respondents, 24 mothers (55.8%), did not receive support and 19 mothers (44.2%) received support. There were 19 mothers (44.2%), 29 mothers (67.4%) who worked, and 14 mothers who did not work (32.6%). Twenty-two mothers (51.2%) did not give exclusive breastfeeding, while 21 (48.8%) applied exclusive breastfeeding.

**Table 1**  
**Frequency distribution according to independent and dependent variables**

Variable	N	%
Family support:		
Unsupported	24	55,8
Support	19	44,2
Mothers' work:		
Work	29	67,4
Unwork	15	32,6
Breastfeeding success:		
Not exclusive breastfeeding	22	51,2
Exclusive breastfeeding	21	48,8

**Results of Bivariate Analysis**

The analysis of the relationship between family support and the success of exclusive breastfeeding shows that out of 24 mothers who did not receive support, 16 mothers (66.7%) did not give exclusive breastfeeding. Of 19 mothers who got support, six mothers (31.6%) did not give exclusive breastfeeding.

The statistical test results obtained *p value* = 0.048. It can be concluded that there is a significant relationship between family support and exclusive breastfeeding. The analysis results also obtained the value of OR = 4.333. It means respondents who did not get family support had a four times greater chance of not giving their infants exclusive breastfeeding than mothers who received family support.

**Table 2**  
**Relationship between family support and breastfeeding success**

Variable	<i>p-value</i>	OR
Family support and breastfeeding success	0,048	4,333

Analysis of the relationship between mother's work and the success of Exclusive Breastfeeding out of 29 working mothers found that 19 people (65.5%) did not give Exclusive Breastfeeding. Of 14 mothers who did not work, three people (21.4%) did not give Exclusive Breastfeeding. The results of the statistical test obtained *p value* = 0.017. It can be concluded that there is a significant relationship between the mothers' work and exclusive breastfeeding. The analysis results also obtained the value of OR = 6.967. One means that respondents who worked have a six times greater chance of

not giving exclusive breastfeeding to their infants compared to mothers who did not work.

**Table 3**  
**Relationship between mothers' work and breastfeeding success**

Variable	<i>P value</i>	OR
Mother's occupation with breastfeeding success	0,017	6,967

**DISCUSSION**

Family support

Based on the study's results, it was found that out of 24 mothers who did not receive support, 16 people (66.7%) did not give exclusive breastfeeding. Of 19 mothers who received support, six people (31.6%) did not give exclusive breastfeeding because breast milk does not come out. The relationship between the family and its social environment can be accessed by the supportive family that assists family members.

This research is in line with Anggorowati, and Fita Nuzulia (2013), which stated that most mothers in Bebengan Village, Boja District, Kendal Regency, did not receive support from their families in providing exclusive breastfeeding to their infants. The existing theory states family support can be obtained from the husband or wife, children, and parents. It includes several things, such as providing information about breastfeeding, providing support during the lactation process, and providing attention and physical needs needed by the mother during the breastfeeding process. Breastfeeding support will build the mother's confidence. Confident mothers can breastfeed their infants and will be more successful in continuing to breastfeed (Asih, Yusari. Risneni., 2016).

Most of the mothers in this study received family support when viewed from the age of the respondents. They were between 20-35 years old. This age is a good age for reproduction, where during the breastfeeding process, mothers will experience psychological disorders, especially if the milk given is limited. It becomes a critical chore for the husband to pay attention to and foster good relations with his wife during this period. In facing difficulties during the breastfeeding process, his wife will communicate, consult, and ask for help from her husband.

This research also shows that families' understanding can cause breastfeeding mothers who do not receive support in exclusive breastfeeding. They still think that breastfeeding is a normal thing that women experience. If their family does not provide support and attention, it will trigger anxiety, which can result in disturbances in milk production.

Health workers, especially midwives, are expected to continue educating mothers and families in providing support. They can also imply to husbands that a breastfeeding mother must be motivated and accompanied by her husband to establish interaction between husband and wife. The mother will feel cared for and supported by her husband.

Mothers' Work

Based on the study results, most of the data obtained from 29 working mothers obtained, as many as 19 people

(65.5%) did not give exclusive breastfeeding. Of 14 mothers who did not work, it was found that three people (21.4%) did not give exclusive breastfeeding. According to the KBBI, the definition of work is something that is done to earn a living or livelihood. It is in line with Sihombing (2018) research that most mothers who have infants aged 7-12 months in the Hinai Kiri Health Center work outside their homes.

In this study, if the theory and results of previous research are linked, it shows that in the Penawar Jaya Health Center working area, many mothers work outside the home to help their husbands make money. This situation is good when viewed from the goal of supporting the family's economy, but working outside the home also risks the development and growth of their infants, where the mother is not always available when her infant needs her. The positive side that can be taken from working mothers is that they will have or add insight socially because they associate with many people. Working mothers can also obtain information other than work-related as well as health-related information.

In this study, the types of work undertaken by these mothers varied from those that required full-time to part-time jobs that did not take long to leave the house, especially for infants who needed breastfeeding.

It is hoped that working mothers can make innovations in dividing their time to meet their needs, especially if they still have infants under six months old regarding exclusive breastfeeding. It is recommended that mothers express milk before work. It can be given to infants when left at work or if the place of work is close to where their live, they can give breastfeeding during work breaks.

The success of exclusive breastfeeding

Based on the results of research on mothers who have infants aged 7-12 months in the Work Area of the Penawar Jaya Health Center in Tulang Bawang Regency, the majority of mothers did not give exclusive breastfeeding as many as 22 mothers (51.2%), and 21 mothers (48.8%) gave exclusive breastfeeding.

According to Sutanto (2019), exclusive breastfeeding is breastfeeding infants without complementary foods and drinks (including orange juice, honey, and sugar water) starting from newborns up to six months of age. It can be given at any time, regardless of the time of administration, at least ten times a day.

This study's results align with research by Husnul Muthoharoh and Eka Sarofah Ningsih (2019), where the success rate of exclusive breastfeeding in Payaman Village is still low. Meanwhile, according to Fitri and Wiji (2019), exclusive breastfeeding will be closely related to a period of rapid growth and development for infants, reaching its peak at 24 months. This period is often termed a golden period as well as a critical period. The golden period is when you get an appropriate nutritional intake for optimal growth and development in infancy.

In this study, most of the infants aged 7-12 months who were exclusively breastfed well stated that during pregnancy, their mothers began to know that giving only breast milk until the age of six months without additional food would benefit the infants. On the other hand, some mothers who do not give exclusive breastfeeding give the reason that it does not come out properly during breastfeeding, so they provide additional formula milk at the age of fewer than six months.

Efforts that midwives can make related to exclusive breastfeeding are to continue to carry out service activities. one of which is class activities for pregnant women. Educating mothers about the importance of giving only

breast milk until the age of six months or exclusive breastfeeding is crucial. They explained the benefits of breastfeeding for the growth and development of the infants as well as taught mothers how to care for their breasts during pregnancy so that breast milk can come out smoothly after giving birth.

#### *Results of Bivariate Analysis*

Results of analysis of family Support with Exclusive Breastfeeding Success

Based on the study's results, 16 mothers (66.7%) did not receive family support and did not give exclusive breastfeeding for their infants. In addition, six mothers (31.6%) who received family support did not provide exclusive breastfeeding for their infants. The statistical test results obtained  $p\ value = 0.048$ . It can be concluded that there is a significant relationship between family support and exclusive breastfeeding. From the analysis results, the value of OR = 4.333 was also obtained, meaning that respondents who did not receive family support had a four times greater chance of not giving exclusive breastfeeding to their infants than mothers who received family support.

According to Yusari Asih (2016), family support in breastfeeding will build the mother's' self-confidence. Confident mothers can breastfeed their infants more successfully to keep the breastfeeding program. Families can assist by helping when asked for help, helping clean the house, or looking after older children. Breastfeeding mothers also need good listeners by providing emotional support, encouragement, and support so that the mothers' confidence is able to breastfeed.

This study's results align with Anggorowati and Fita Nuzulia's (2013) research, where family support is related to exclusive breastfeeding for infants in Bebengan Village, Boja District, Kendal Regency, Central Java.

In this study, there were still mothers who felt they had not received support from their family, even though during breastfeeding, a mother needed the support of other people and depended on the family. Without family support, it caused mothers are discouraged in giving breastfeeding, especially at the beginning of the lactation period. In this study, it was also seen that mothers who have received support from the family also did not give exclusive breastfeeding. In comparison, mothers who gave birth for the first time have no experience in the lactation process. When breast milk does not come out in large quantities, they give formula milk.

Researchers believe that the family's support, especially the husband, is needed by the mothers. In comparison, many families do not participate in lactation because they think breastfeeding is the mothers' duty. They do not take part because they are busy working, and some consider it a duty as a woman. This condition will make mothers more stressed. It affects the process of breast milk production.

According to Friedman (2010), there are four criteria for support that need to be provided by the family: informational, appraisal/award, instrumental, and emotional support.

The researchers believe that the support that families can give increases mothers' interest in breastfeeding their infants. It includes the family being able to provide information on how to breastfeed correctly contained in the MCH handbook so that the family can encourage mothers to read the Maternal and Child Health Book. The family can reward the mother by always giving praise as a great mother, encouraging and motivating mothers to continue

breastfeeding despite difficulties or obstacles. Family, especially the husband, can provide support by buying milk for the mother and providing nutritious food. Most importantly, the husband continues to provide emotional support by reassuring the mother if she starts feeling worried that little milk is being produced.

### Analysis of the relationship between Mothers' Work and Success of Exclusive Breastfeeding

Based on the study's results, 19 working mothers (65.5%) did not provide exclusive breastfeeding for their infants. At the same time, three mothers who did not work (21.4%) did not give exclusive breastfeeding for their infants. The results of the statistical test obtained  $p$  value = 0.017. It can be concluded that there is a significant relationship between the mothers' work and exclusive breastfeeding. The analysis results also obtained the value of OR = 6.967. It means that respondents who worked had a six times greater chance of not giving exclusive breastfeeding to their infants than mothers who did not.

Based on the 2012 Indonesian Health Demographic Survey (IDHS), 57% of the workforce in Indonesia are women. Factors that hinder breastfeeding success for working mothers include short time off, lack of workplace support, and short time off at work (not enough time to express breast milk). There is no room to express breast milk.

Sihombing (2018) researched that employment status is related to exclusive breastfeeding in the Hinai Kiri Health Center work area. Working mothers tend not to breastfeed their infants exclusively.

In this study, the mothers' work affects exclusive breastfeeding to infants. When compared with mothers who did not work, 78.8% gave exclusive breastfeeding because the mother is at home 24 hours, so anytime the mother can give breast milk directly to the infants. In this study, mothers who worked as laborers with short working time, some of whom are 34.5%, can continue to breastfeed exclusively. Mothers who worked and had difficulty in exclusive breastfeeding should be able to continue to provide breast milk by expressing and storing it so that when the mother is working, the breast milk that has been stored can be given to infants left at home.

For this reason, work should not be an excuse for mothers not to give exclusive breastfeeding to their infants because mothers can get breast milk by expressing it and storing it so that breast milk can be given to infants when needed. For this reason, midwives can also provide information and education to working mothers on how to express and store breast milk so that the success of exclusive breastfeeding can increase and efforts to prevent malnutrition and illness in infants can be carried out by exclusive breastfeeding.

## CONCLUSIONS AND RECOMMENDATIONS

### Conclusions

Family support for mothers who have infants aged 7-12 months in the Work Area of the Penawar Jaya Health Center, Tulang Bawang Regency, in 2021 was divided into two categories; mothers without support, 55.8% and 44.2% of mothers with support. Occupation of mothers who have infants aged 7-12 months in the Working Area of the Penawar Jaya Health Center, Tulang Bawang Regency, in

2021 divided into two categories; the working mothers' category is 67.4% and 32.6% not working. There is a relationship between family support and the success of exclusive breastfeeding for mothers who have infants aged 7-12 months in the Working Area of the Penawar Jaya Health Center, Tulang Bawang Regency, in 2021. These have  $p$  values = 0.048 and OR 4.333. There is a relationship between workers and the success of exclusive breastfeeding for mothers who have infants aged 7-12 months in the Work Area of the Penawar Jaya Health Center, Tulang Bawang Regency, in 2021 with  $p$ -value = 0.017 and OR

### Suggestion

Working mothers breastfeeding their infants can motivate themselves and increase their confidence that mothers can give exclusive breastfeeding. They can be more active in seeking lactation information, how to express breast milk and store breast milk expressed by the mother, and participate in successful exclusive breastfeeding. Public health staff, especially midwives, can optimize educational activities on a scheduled basis so that the education outreach can be broad. Health centers can provide education about breastfeeding, especially storage of expressed milk for breastfeeding mothers and health cadres, to increase exclusive breastfeeding outcomes. The officers can educate families, especially husbands, about the importance of supporting breastfeeding mothers so that the lactation process can be carried out optimally.

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